POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	1-G		6/25/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	∫ρ2	852	07-93-0'
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim Final	Original	Date						Claim Final	Original	Date						Claim Final	Original	Date					
1								51	N	N						101							
2								52								102							
3								53								103							
4								54								104							
5								55	N	N						105							
6								56	✔	✔						106							
7								57								107							
8								58								108							
9								59								109							
10								60								110							
11								61								111							
12								62								112							
13								63								113							
14								64		✔						114							
15								65		✔						115							
16								66		✔						116							
17								67	✔	✔						117							
18								68	N	N						118							
19								69	N	N						119							
20								70								120							
21								71								121							
22								72								122							
23								73								123							
24								74								124							
25								75								125							
26								76								126							
27								77								127							
28								78								128							
29								79								129							
30	N	N						80								130							
31								81								131							
32								82								132							
33								83								133							
34								84								134							
35	N	N						85								135							
36	✔	✔						86								136							
37		✔						87								137							
38		✔						88								138							
39		✔						89								139							
40		✔						90								140							
41		✔						91								141							
42	✔	✔						92								142							
43	N	N						93								143							
44								94								144							
45								95								145							
46								96								146							
47								97								147							
48								98								148							
49								99								149							
50	N	N						100								150							

If more than 150 claims or 10 actions
staple additional sheet here

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